Combined Declaration For Patent Application and Power of Attorney							87197		OCKET	
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PRINTING APPARATUS AND METHOD WITH IMPROVED CONTROL OF HUMIDITY AND TEMPERATURE										
The specification of which (check only one item below):										
X is attached hereto.										
was filed as United States Application Serial No. on and										
was amended on (if applicable).										
was filed as PCT international application Number on and was amended on (if applicable).										
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-*d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or (365 (a) of any PCT international application(s) which designates at least one country other than the United States of America, listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:										
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119: COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMED UNDER 35 USC \$119										
COUNTRY (# PCT, indicate PCT)	^	PPLICATION NUMBER		DATE OF FILING (month/dayyear)			YES	INDER 35 USC	NO NO	
							YES		- NO	
							YES		NO	
I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below: PRIOR PROVISIONAL APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e):										
PROVISIONAL APPLICATION NUMBER FILING DATE (month/day/year)										
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:										
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:										
U.S. APPLICATIONS						STATUS (Check one)				
U.S. APPLICATION NUMBER			U.S. FILING DATE			ED	PENDING	AB/	ANDONED	
PCT APPLICATIONS DESIGNATING THE U.S.										
PCT APPLICATION NO. PCT FILE		ING DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)		\top				

C mbined Declarati n F r Pat nt Applicati n and Pow r of Att rney (Continued) POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. **Direct Telephone Calls to:** Send Correspondence to: (name and telephone number) Patent Legal Staff Eastman Kodak Company Norman Rushefsky 343 State Street 585 588-4529 Rochester, NY 14650-2201 FAX: 585 477-4646 SECOND GIVEN NAME FIRST GIVEN NAME FAMILY NAME FULL NAME OF Τ. Regan Michael COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & CITY 0 USA New York 14450 Fairport STATE & ZIP CODE (COUNTRY) **BUSINESS ADDRESS** BUSINESS New York 14650 USA Eastman Kodak Company 343 State Street, Rochester FIRST GIVEN NAME SECOND GIVEN NAME FAMILY NAME FULL NAME OF 2 Peffer Robert M. STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & 0 New York 14526 USA Penfield STATE & ZIP CODE (COUNTRY) **BUSINESS ADDRESS** BUSINESS 2 New York 14650 USA Eastman Kodak Company 343 State Street, Rochester FIRST GIVEN NAME SECOND GIVEN NAME 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & STATE & ZIP CODE (COUNTRY) BUSINESS ADDRESS CITY BUSINESS 3 SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME FULL NAME OF INVENTOR 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & CITIZENSHIP 0 BUSINESS ADDRESS STATE & ZIP CODE (COUNTRY) BUSINESS FIRST GIVEN NAME SECOND GIVEN NAME FAMILY NAME FULL NAME OF 2 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & 0 BUSINESS ADDRESS STATE & ZIP CODE (COUNTRY) BUSINESS FIRST GIVEN NAME SECOND GIVEN NAME FAMILY NAME FULL NAME OF STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & STATE & ZIP CODE (COUNTRY) **BUSINESS ADDRESS** BUSINESS I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. SIGNATURE OF INVENTOR 203 DATE NOVEMBER 25 SIGNATURE OF INVENTOR 204 SIGNATURE OF INVENTOR 206 DATE DATE DATE